

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>SV</i>	<i>32</i>	<i>2/19</i>
FORMALITY REVIEW	<i>M.H.</i>	<i>625</i>	<i>02-27-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	12/11/01
2	12/11/01
3	12/11/01
4	12/11/01
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8	12/11/01
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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